APPLICATION INFORMATION

Application Type::

REGULAR

Subject Matter::

UTILITY

CD-ROM or CD-R?::

NONE

Title::

COMPOSITIONS AND METHODS FOR

THE TREATMENT OF RHEUMATOID

ARTHRITIS

Attorney Docket Number::

P1998R1

INVENTOR INFORMATI

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Oakland

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 6087 Ocean View Drive

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

US

Postal or Zip Code of Mailing Address::

94618

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Sarah
Family Name:: Bodary
City of Residence:: Menlo Park

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 1951 Camino de los Robles

City of Mailing Address:: Menlo Park

State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94025

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Hilary Family Name:: Clark

City of Residence:: San Francisco

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 1504 Noe Street
City of Mailing Address:: San Francisco

State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94131

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Applicant Authority Type: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Thomas

Middle Name:: D. Family Name:: Wu

City of Residence:: San Francisco

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address::

41 Nevada Street
City of Mailing Address::

San Francisco

State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94110

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Jill

Family Name:: Schoenfeld City of Residence:: Ashland

State or Province of Residence:: OR Country of Residence:: US

Street of Mailing Address:: 680 Spring Creek Drive

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

97520

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: William

Middle Name:: I.

Family Name:: Wood
City of Residence:: Cupertino

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 15060 Montebello Road

City of Mailing Address:: Cupertino

State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 95014

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CORRESPONDENCE IN RMATION

Correspondence Customer Number::

09157

REPRESENTATIVE INFORMATION

Representative Customer Number::

00000

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US03/36002	11/12/03
PCT/US03/36002	119(e) of	60/425,931	11/12/02

FOREIGN PRIORITY INFORMATION

ASSIGNMENT INFORMATION

Assignee Name::

Genentech, Inc.

Street of Mailing Address::

1 DNA Way

City of Mailing Address::

South San Francisco

State or Province of Mailing Address::

CA

Country of Mailing Address::

US

Postal or Zip Code of Mailing Address::

94080